

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 765101

**Entity Name:** CABANA CLUB CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1582 GULF BLVD.  
CLEARWATER, FL 33767

**Current Mailing Address:**

QUALIFIED PROPERTY MANAGEMENT INC  
5901 US HIGHWAY 19 SUITE 7  
NEW PORT RICHEY, FL 34652 US

**FEI Number:** 59-2186289

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

QUALIFIED PROPERTY MANAGEMENT INC  
5901 US HIGHWAY 19  
SUITE 7  
NEW PORT RICHEY, FL 34652 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** MARY BURNARD

05/28/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MENCHORN, CINDY  
Address        QUALIFIED PROPERTY  
                  MANAGEMENT INC  
                  5901 US HIGHWAY 19 SUITE 7  
City-State-Zip: NEW PORT RICHEY FL 34652

Title            TREASURER, SECRETARY  
Name            LUCKEY, TAMI  
Address        QUALIFIED PROPERTY  
                  MANAGEMENT INC  
                  5901 US HIGHWAY 19 SUITE 7  
City-State-Zip: NEW PORT RICHEY FL 34652

Title            DIRECTOR  
Name            MORRIS, ASHLI  
Address        QUALIFIED PROPERTY  
                  MANAGEMENT INC  
                  5901 US HIGHWAY 19 SUITE 7  
City-State-Zip: NEW PORT RICHEY FL 34652

Title            DIRECTOR  
Name            CARROLL, JERILYNN  
Address        QUALIFIED PROPERTY  
                  MANAGEMENT INC  
                  5901 US HIGHWAY 19 SUITE 7  
City-State-Zip: NEW PORT RICHEY FL 34652

Title            DIRECTOR  
Name            DIRRANE, MICHAEL  
Address        QUALIFIED PROPERTY  
                  MANAGEMENT INC  
                  5901 US HIGHWAY 19 SUITE 7  
City-State-Zip: NEW PORT RICHEY FL 34652

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CINDY MENCHORN

PRESIDENT

05/28/2024

Electronic Signature of Signing Officer/Director Detail

Date